

# Dr Tahalani and Partners

### **Quality Report**

Southgate Road Medical Centre, 101-103 Southgate Road London N1 3JS

Tel: 020 7704 2233 Date of inspection visit: 27 July 2016

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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

### Ratings

Overall rating for this service	Good	
Are services safe?	Good	
Are services effective?	Good	

## Summary of findings

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### Overall summary

#### **Letter from the Chief Inspector of General Practice**

We carried out an announced comprehensive inspection of Dr Talahani and Partners on the 18 February 2015. The practice was rated as requires improvement for providing effective care. After the comprehensive inspection, the practice submitted an action plan, outlining what they would do to ensure the care they provided was effective and met the standard required by CQC.

We undertook this focussed inspection on 27 July 2016 to check that the practice had followed their plan and to confirm that they were now providing effective care. This report covers our findings in relation to those requirements and also where additional improvements have been made following the initial inspection. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Dr Talahani and Partners on our website at www.cqc.org.uk.

Overall the practice was rated as Good.

Following the focussed inspection we found the practice to be good for providing effective care.

#### Our key findings across all the areas we inspected were as follows:

- All staff that act as chaperones had received chaperone training.
- The practice had purchased an automated external defibrillator (used to attempt to restart a person's heart in an emergency).
- All staff had received training on infection control.
- The practice had completed one complete clinical audit cycle.

**Professor Steve Field (CBE FRCP FFPH FRCGP)** Chief Inspector of General Practice

# Summary of findings

## The five questions we ask and what we found

We always ask the following five questions of services.

<ul> <li>Are services safe?</li> <li>The practice is rated as good for providing safe services.</li> <li>Risks to patients were assessed and well managed. There were defibrillators at both sites.</li> </ul>	Good
Are services effective? The practice is rated as good for providing effective services.	Good
<ul> <li>Clinical audits demonstrated quality improvement.</li> </ul>	
Staff had the skills, knowledge and experience to deliver effective care and treatment.	



# Dr Tahalani and Partners

**Detailed findings** 

## Why we carried out this inspection

We undertook a focussed inspection of Dr Talahani and Partners 27 July 2016. This is because the service had been rated as 'requires improvement' for providing effective care during the comprehensive inspection carried out on 18 February 2015.

We had found that some staff that acted as chaperones had not received appropriate training and some staff had not received training on infection control. The practice did not have an automated external defibrillator (used to attempt to restart a person's heart in an emergency) available and had not carried out a risk assessment to identify what action would be taken in an emergency. We also found that there were no completed clinical audit cycles to demonstrate how they improved the care, treatment and outcomes for people..

This inspection was carried out to check that improvements have been made. We inspected the practice against two of the five questions we asked about services: is the service safe and is the service effective.



# Are services safe?

# **Our findings**

Arrangements to deal with emergencies and major incidents

The practice had purchased two automated external defibrillator (used to attempt to restart a person's heart in an emergency) in July 2016 and all staff had received training on how to use it. There was an AED at each of the two practice sites.



## Are services effective?

(for example, treatment is effective)

# Our findings

#### Management, monitoring and improving outcomes for people

There was evidence that clinical audits were carried out to demonstrate quality improvement and all relevant staff were involved to improve care and treatment and people's outcomes.

There was one completed clinical audit carried out in the last year where the improvements made were implemented and monitored. The practice had carried out an audit to evaluate whether physical health monitoring was being carried out in secondary care and primary care for patients on antipsychotic medication and to assess

whether shared care arrangements with the hospital trust was being adhered to. Thirty patients were identified, of which 40% did not have blood tests and/or assessments of nutritional status, diet and physical activity in the last twelve months. The practice arranged for all those identified to be reviewed and the second cycle of the audit carried out 6 months later showed all outstanding assessments had been completed.

#### **Effective staffing**

All staff had received infection control training and this was now included in induction training for all new staff. Staff had access to appropriate training to cover the scope of their work and all staff that carried out chaperone duties had received appropriate training.